

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT		1. CONTRACT ID CODE		PAGE OF PAGES	
2. AMENDMENT/MODIFICATION NO.		3. EFFECTIVE DATE		4. REQUISITION/PURCHASE REQ NO	
P00004		See Block 16C		192114FBO00004003.7	
5. PROJECT NO. (If applicable)		6. ISSUED BY		7. ADMINISTERED BY (If other than Item 6)	
		CODE ICE/DM/DC-DC		CODE	
ICE/Detent Mngt/Detent Contracts-DC Immigration and Customs Enforcement Office of Acquisition Management 801 I Street NW, Suite 910 Washington DC 20536					
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)		9A. AMENDMENT OF SOLICITATION NO.			
SUFFOLK COUNTY OF ATTN SUFFOLK COUNTY OF DAN MARTINI CFO - FINANCIAL SERVIC 20 BRADSTON STREET BOSTON MA 021182705		(x)			
		9B. DATED (SEE ITEM 11)			
		10A. MODIFICATION OF CONTRACT/ORDER NO.			
		ACD-3-H-0007			
		HSCEDM-14-F-IG018			
CODE 6180434340000		10B. DATED (SEE ITEM 13)			
FACILITY CODE		02/18/2014			

11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS

☐ The above numbered solicitation is amended as set forth in item 14. The hour and date specified for receipt of Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted, or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGEMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.

☐ is extended. ☐ is not extended.

12. ACCOUNTING AND APPROPRIATION DATA (If required) Net Decrease: -\$60,000.00
See Schedule

13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.

CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.
	B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b)
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:
	D. OTHER (Specify type of modification and authority)
X	Bilateral Modification - In accordance with ACD-3-H-0007

E. IMPORTANT: Contractor ☐ is not. ☒ is required to sign this document and return 1 copies to the issuing office.

14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)

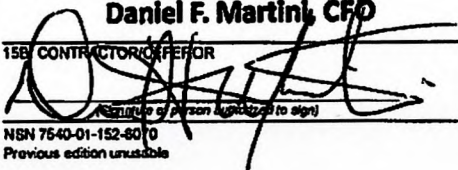
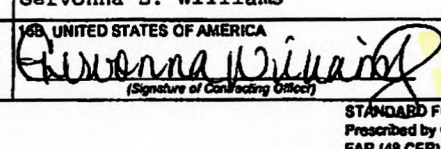
DUNS Number: 618043434
REQUISITION: 192114FBO00004003.6
Program Office: Amanda Raymond, 781-359-7520
Program Office COTR: Donald Granahan, 781-359-7530
Contract Specialist: Aubrey Acemyan, 202-732-2564
Contracting Officer: Gervonna Williams, 202-732-2583

Approved As To Form and Legal
Compliance on Date 2/13/14
Russell T. Hamsy
Assistant General Counsel
Suffolk County Sheriff's Department
This approval is not an execution

The purpose of this modification is to deobligate funding from CLIN 0003 in the amount of \$60,000.00 due to ICE not utilizing transportation services performed by Suffolk County at this time.

Continued ...

Except as provided herein, all terms and conditions of the document referenced in Item 9A or 10A, as heretofore changed, remains unchanged and in full force and effect

15A. NAME AND TITLE OF SIGNER (Type or print)		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print)	
Daniel F. Martini, CFO		Gervonna B. Williams	
15B. CONTRACTING OFFICER		15C. DATE SIGNED	
		8/13/14	
15D. UNITED STATES OF AMERICA		16C. DATE SIGNED	
		8/14/14	

NSN 7540-01-152-6070
Previous edition unusable

STANDARD FORM 30 (REV. 10-83)
Prescribed by GSA
FAR (48 CFR) 53.243

CONTINUATION SHEET	REFERENCE NO. OF DOCUMENT BEING CONTINUED	PAGE	OF
	ACD-3-H-0007/HSCEDM-14-F-IG018/P00004	2	3

NAME OF OFFEROR OR CONTRACTOR
SUFFOLK COUNTY OF

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	<p>The obligated funding on this order is estimated to cover performance through July 31, 2014.</p> <p>The total obligated amount for this task order is decreased as follows: From: \$2,931,480.00 By: \$60,000.00 To: \$2,871,480.00</p> <p>The funding provided in this modification is the amount presently available for payment and allotted to this task order. The service provider agrees to perform to the point that does not exceed the total amount currently allotted to the items funded under this task order. The service provider is not authorized to continue to work on those item(s) beyond that point. The Government will not be obligated to reimburse the service provider in excess of the amount allotted to those item(s) for performance beyond the funding allotted.</p> <p>Exempt Action: Y Discount Terms: Net 30</p> <p>Accounting Info: RMD10LT-000 BA 32-23-00-000 18-61-0300-05-00-00-00 GE-21-31-00- ----- --- 000000</p> <p>FOB: Destination Period of Performance: 02/01/2014 to 07/31/2014</p> <p>Change Item 0003 to read as follows (amount shown is the total amount):</p> <p>0003 TRANSPORTATION Hourly Rate: \$25.00 Overtime Rate: \$37.50 Mileage: \$.36/mile</p> <p>ICE does not currently require transportation services to be provided by Suffolk County. As such, the funds which were obligated for this service are hereby deobligated.</p> <p>Remove funds from FFMS Item 5 MDL 1.</p> <p>The obligated funding for this CLIN is decreased as follows: From: \$60,000.00 By: \$60,000.00 Continued ...</p>				0.00

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED

ACD-3-H-0007/HSCEDM-14-F-IG018/P00004

PAGE OF

3

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NAME OF OFFEROR OR CONTRACTOR

SUFFOLK COUNTY OF

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	To: \$0 Product/Service Code: V222 Product/Service Description: TRANSPORTATION/TRAVEL/RELOCATION- TRAVEL/LODGING/RECRUITMENT: PASSENGER MOTOR CHARTER				

AMENDMENT OF SOLICITATION/MODIFICATION OF CONTRACT		1. CONTRACT ID CODE		PAGE OF PAGES	
				1 3	
2. AMENDMENT/MODIFICATION NO.		3. EFFECTIVE DATE		4. REQUISITION/PURCHASE REQ. NO.	
P00008		11/04/2014		192115FBO00004003	
6. ISSUED BY		CODE		7. ADMINISTERED BY (If other than Item 6)	
ICE/Detention Compliance & Removals Immigration and Customs Enforcement Office of Acquisition Management 801 I Street, NW Suite 930 WASHINGTON DC 20536		ICE/DCR		CODE ICE/DCR	
8. NAME AND ADDRESS OF CONTRACTOR (No., street, county, State and ZIP Code)		(x) 9A. AMENDMENT OF SOLICITATION NO.			
SUFFOLK COUNTY OF ATTN SUFFOLK COUNTY OF DAN MARTINI CFO - FINANCIAL SERVIC 20 BRADSTON STREET BOSTON MA 021182705		9B. DATED (SEE ITEM 11)			
		x 10A. MODIFICATION OF CONTRACT/ORDER NO.			
		ACD-3-H-0007			
		HSCEDM-14-F-IG018			
		10B. DATED (SEE ITEM 13)			
CODE 6180434340000		FACILITY CODE		02/18/2014	

11. THIS ITEM ONLY APPLIES TO AMENDMENTS OF SOLICITATIONS

The above numbered solicitation is amended as set forth in Item 14. The hour and date specified for receipt of Offers ☐ is extended, ☐ is not extended.
 Offers must acknowledge receipt of this amendment prior to the hour and date specified in the solicitation or as amended, by one of the following methods: (a) By completing Items 8 and 15, and returning _____ copies of the amendment; (b) By acknowledging receipt of this amendment on each copy of the offer submitted; or (c) By separate letter or telegram which includes a reference to the solicitation and amendment numbers. FAILURE OF YOUR ACKNOWLEDGEMENT TO BE RECEIVED AT THE PLACE DESIGNATED FOR THE RECEIPT OF OFFERS PRIOR TO THE HOUR AND DATE SPECIFIED MAY RESULT IN REJECTION OF YOUR OFFER. If by virtue of this amendment you desire to change an offer already submitted, such change may be made by telegram or letter, provided each telegram or letter makes reference to the solicitation and this amendment, and is received prior to the opening hour and date specified.

12. ACCOUNTING AND APPROPRIATION DATA (If required)

Net Increase:

\$1,765,980.00

See Schedule

13. THIS ITEM ONLY APPLIES TO MODIFICATION OF CONTRACTS/ORDERS. IT MODIFIES THE CONTRACT/ORDER NO. AS DESCRIBED IN ITEM 14.

CHECK ONE	A. THIS CHANGE ORDER IS ISSUED PURSUANT TO: (Specify authority) THE CHANGES SET FORTH IN ITEM 14 ARE MADE IN THE CONTRACT ORDER NO. IN ITEM 10A.
	B. THE ABOVE NUMBERED CONTRACT/ORDER IS MODIFIED TO REFLECT THE ADMINISTRATIVE CHANGES (such as changes in paying office, appropriation date, etc.) SET FORTH IN ITEM 14, PURSUANT TO THE AUTHORITY OF FAR 43.103(b).
	C. THIS SUPPLEMENTAL AGREEMENT IS ENTERED INTO PURSUANT TO AUTHORITY OF:
X	D. OTHER (Specify type of modification and authority) In accordance with ACD-3-H-0007

E. (IMPORTANT): Contractor ☐ is not, ☒ is required to sign this document and return _____ 0 _____ copies to the issuing office.

14. DESCRIPTION OF AMENDMENT/MODIFICATION (Organized by UCF section headings, including solicitation/contract subject matter where feasible.)

DUNS Number: 618043434

Contracting Officer's Representative: Donald Granahan, 781-359-7530,

Donald.Granahan@ice.dhs.gov

Contracting Officer: Gervonna Williams, 202-732-2583, Gervonna.B.Williams@ice.dhs.gov

Contract Specialist: Roberta O. Onuma, 202-732-7021, Roberta.O.Onuma@ice.dhs.gov

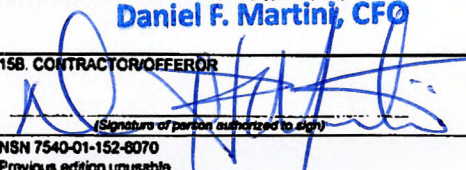
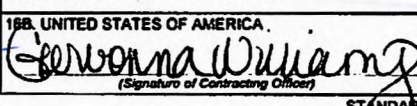
The purpose of this modification is to provide funding to Suffolk County for Detainee Bed/Days and Processing Area Rent. The Period of Performance is through December 31, 2014.

This will increase the amount obligated as follows:

From: \$5,141,640.00 By: \$1,765,980.00 To: \$6,907,620.00

Continued ...

Except as provided herein, all terms and conditions of the document referenced in Item 9A or 10A, as heretofore changed, remains unchanged and in full force and effect.

15A. NAME AND TITLE OF SIGNER (Type or print) Daniel F. Martini, CFO		16A. NAME AND TITLE OF CONTRACTING OFFICER (Type or print) Gervonna B. Williams	
15B. CONTRACTOR/OFFEROR	15C. DATE SIGNED	16B. UNITED STATES OF AMERICA.	16C. DATE SIGNED
	4/7/15		11/4/14

NSN 7540-01-152-8070
Previous edition unusable

STANDARD FORM 30 (REV. 10-83)
Prescribed by GSA
FAR (48 CFR) 53.243

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED
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2 3NAME OF OFFEROR OR CONTRACTOR
SUFFOLK COUNTY OF

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
0001	<p>Exempt Action: Y FOB: Destination Period of Performance: 02/01/2014 to 12/31/2014</p> <p>Change Item 0001 to read as follows (amount shown is the total amount):</p> <p>DETAINEE BED/DAYS</p> <p>Detainee Bed/Day rate is \$90.00</p> <p>CLIN 0001 is increased as follows: From: \$5,021,640.00 By: \$1,720,980.00 To: \$6,742,620.00</p> <p>Quantity is increased as follows: From: 55,796 By: 19,122 To: 74,918</p> <p>Product/Service Code: S206 Product/Service Description: HOUSEKEEPING- GUARD</p> <p>Accounting Info: ERODETN-T02 BA 31-12-00-000 18-61-0300-05-00-00-00 GE-23-08-00- ----- 000000 Funded: \$0.00</p> <p>Accounting Info: ERODETN-T02 BA 31-12-00-000 18-61-0300-05-00-00-00 GE-23-08-00- ----- 000000 Funded: \$0.00</p> <p>Accounting Info: ERODETN-T02 EA 31-12-00-000 18-61-0300-05-00-00-00 GE-23-08-00- ----- 000000 Funded: \$0.00</p> <p>Accounting Info: ERODETN-T02 BA 31-12-00-000 18-61-0300-05-00-00-00 GE-23-08-00- ----- 000000 Funded: \$1,720,980.00</p> <p>Change Item 0002 to read as follows (amount shown is the total amount):</p>	74918	EA	90.00	6,742,620.00
0002	<p>PROCESSING AREA RENT</p> <p>Processing Area Rental rate is \$15,000.00/month</p> <p>CLIN 0002 is increased as follows: Continued ...</p>	11	MO	15,000.00	165,000.00

CONTINUATION SHEET

REFERENCE NO. OF DOCUMENT BEING CONTINUED

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OF

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NAME OF OFFEROR OR CONTRACTOR
SUFFOLK COUNTY OF

ITEM NO. (A)	SUPPLIES/SERVICES (B)	QUANTITY (C)	UNIT (D)	UNIT PRICE (E)	AMOUNT (F)
	From: \$120,000.00 By: \$45,000.00 To: \$165,000.00 Quantity is increased as follows: From: 8 months By: 3 months To: 11 months Product/Service Code: S216 Product/Service Description: HOUSEKEEPING- FACILITIES OPERATIONS SUPPORT Accounting Info: NONE000-000 BA 31-12-00-000 18-61-0300-05-00-00-00 GE-23-08-00- ----- --- 000000 Funded: \$0.00 Accounting Info: NONE000-000 BA 31-12-00-000 18-61-0300-05-00-00-00 GE-23-08-00- ----- --- 000000 Funded: \$0.00 Accounting Info: NONE000-000 BA 31-12-00-000 18-61-0300-05-00-00-00 GE-23-08-00- ----- --- 000000 Funded: \$0.00 Accounting Info: NONE000-000 BA 31-12-00-000 18-61-0300-05-00-00-00 GE-23-08-00- ----- --- 000000 Funded: \$45,000.00 The funding provided in this modification is the amount presently available for payment and allotted to this Task Order. The Service Provider agrees to perform to the point that does not exceed the total amount currently allotted to the items funded under this Task Order. The Service Provider is not authorized to continue to work on those item(s) beyond that point. The Government will not be obligated to reimburse the Service Provider in excess of the amount allotted to those item(s) for performance beyond the funding allotted.				